

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**PUBLICATION S/EXHIBITS/ INFORMATIONAL/PROMOTIONAL ITEMS APPROVAL REQUEST FORM**

Please type or print clearly

**INTRODUCTION**

**NOTE: This form is to be used regardless of whether the publications, exhibits, informational, and promotional items are produced in paper or electronic format for posting on the internet/intranet including home pages. No Typesetting, Graphic Design, Artwork Preparation or Copy Creation is to commence until concept is officially approved. Throughout the instructions and form, the term "Publication" will be used to include maps and all other graphics and other published materials.**

The following instructions will help you complete the 1550-8, and will speed up the overall approval process. Please read all instructions carefully before completing this form. The back side of the 1550-8 has the "BLM Printing and Publication Processing Checklist" which is to assist in the preparation of any other associated functions needed for the publication. Routing should be through the External/Public Affairs Officer and Printing Specialist for review prior to the authorized signatures/approvals.

This request for all State level publications/exhibits under the cost of \$20,000 will be directed to the State and National Center Directors for final review and approval. State level publications/exhibits which exceed \$20,000 are to be directed to the Group Manager, Public Affairs (WO-610) for approval.

**INSTRUCTIONS**

1. **To:** This request will be directed to the State and National Center Directors for final review and approval.

2. **Originating Office:** Office location responsible for the publication or exhibit.

3. **Date of Request:** Date this form completed and sent forward for review and approval.

4. **Publications/Exhibits Title:** Actual or working title of publication or exhibit.

5. **Category:** Identify the most appropriate category based on content, purpose, and audience;

General Interest, Site Specific, Scientific/Technical/

Statistical, Periodical, Planning (EIS, RMP, etc.),

other \_\_\_\_\_

6. **Status:** Select new or revision.

7. **Publication Format:** (See following examples.)

Book	Booklet
Booklet Folder	Brochure
Catalog	Fact Sheet
Flier	Handout
Leaflet	Pamphlet
Newsletter	Technical Note
Poster	Special Report
Technical Report	

Other: \_\_\_\_\_

8. **Signature of Director/Secretary:** If the publication or exhibit has bureauwide scope or has a Secretarial message and/or the official signature of the Director BLM or the Secretary of the Interior, prior authorization from WO-610 (Public Affairs Group Manager) will be necessary.

9. **Objective of Publication/Exhibit:** What benefits will be derived from publishing or creating the exhibit and, conversely, what problems may become evident if it is not published or created. Attach additional sheet(s) if necessary.

10. **Primary Audience:** List type of audience (general public, organization, offices, etc.) that this publication or exhibit is to reach.

11. **Cooperative Effort:** If cooperating entity is contributing any sort of funding, staff time or other support, explain type and extent of support. Attach additional sheet(s) if necessary.

12. **Distribution Intentions:** Describe distribution plans of publication (site or State only or Bureauwide) and how distribution will be accomplished. Attach additional sheet(s) if necessary.

**PRINTED PUBLICATIONS**

13. **Copy Creation:** Identify who will be creating copy.

14. **Illustrations:** List Numbers.

15. **Print:** Check appropriate box.

16. **Print Quality Level:** Quality attributes level (five levels from which to select - level I being the highest, level V the lowest). Obtain assistance from your Printing Specialist for quality level selection.

17. **Justify need for more than one color.**

18. **Complete as indicated** (assistance may be obtained from your Printing Specialist for items 13 through 18).

**EXHIBITS**

19. **Size of Exhibit:** Indicate size in inches/feet/width/height/depth/length/weight/etc.

20. **Expected Exhibit Longevity:** Give time span for which exhibit is to be viewed.

21. **Usage:** Check appropriate box.

22. **Special Requirements:** Indicate any special requirements that may be associated with the exhibit. Such as wiring, water, lighting, security, shipping/transportation, etc.

**FUND CODING, ESTIMATED COST AND APPROVALS**

23. **Fund Coding:** Fill in as appropriate - Refer to latest edition of "Fund Coding Handbook" for current FY appropriations.

24. **Estimated Cost:** This includes all contracted costs associated with this publication, i.e., writing, design, graphics, prepress, printing, and distribution.

25. **Responsible Individuals:** Indicate responsible individuals for contact.

26. **Concept Approvals:** Have appropriate officials sign. Approval must be achieved before any copy is written, or any typesetting, graphic design, or artwork is prepared.

27. **Final Approvals:** Have appropriate officials sign after a review of the final draft of the publication. Ensure that all copy, graphic design and artwork preparation is included. This is the final approval prior to publishing.

The approval process in each step outlined in numbers 26 and 27 should be completed within 10 workdays. If approval notification has not been received within this time frame, the External/Public Affairs Officer or Printing Specialist will contact the originating office to provide a date when the publication/exhibit will be approved.

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PUBLICATIONS/EXHIBITS/INFORMATIONAL/PROMOTIONAL ITEMS APPROVAL REQUEST FORM \*

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1. To	2. Originating Office.	3. Date of Request.
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4. Publications/Exhibits Title:

5. Category (Identify): <input type="checkbox"/> Publication _____ <input type="checkbox"/> Exhibit _____	6. Status (Pubs. Only): <input type="checkbox"/> New <input type="checkbox"/> Revision	7. Pub. Format:
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8. Is the Director's/Secretary's Name/Signature to be used in this publication, or does it contain a Secretarial message or have Bureauwide scope?  
☐ Yes ☐ No (If "Yes," written approval and additional routing is required (WO-610, Public Affairs Group Manager).

9. Objective of Publication/Exhibit:

10. Primary Audience:	11. Cooperative Effort: <input type="checkbox"/> Yes <input type="checkbox"/> No (If "Yes," identify group and contributions)	12. Distribution Intentions (Pubs. only):
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PRINTED PUBLICATIONS		EXHIBITS(Required if over \$3,000.00)
13. Copy Creation. <input type="checkbox"/> In-house BLM <input type="checkbox"/> GPO Contract <input type="checkbox"/> Other (Explain)	14. Illustrations (Number): Photos _____ Line Illustrations _____ Maps _____ Other _____	19. Size of Exhibit
15. Print: <input type="checkbox"/> Single Color <input type="checkbox"/> Multi Color (No. of Colors _____) <input type="checkbox"/> 4-Color Process <input type="checkbox"/> Other _____		20. Expected Exhibit Longevity (Mo/Yrs):
16. Print Quality Level:		21. Usage: <input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor <input type="checkbox"/> One-time <input type="checkbox"/> Multiple <input type="checkbox"/> Portable <input type="checkbox"/> Permanent
17. If more than one color, justification needed (for additional space use Remarks section):		22. Special Requirements (Explain):
18. Finished size of publication: _____ No. of Pages/Panels: _____		
Paper Requirements (JCP Codes): Text _____ Covers _____		
Ink Color(s) Text _____ Covers _____		
Binding Style:	Quantity to be Printed:	Required Ship Date:
Proof Requirements- <input type="checkbox"/> Blueline/Dylux <input type="checkbox"/> Color Proofs <input type="checkbox"/> Press Sheet Inspection		

23 FUND CODING							24 ESTIMATED COST	
ORGAN CODE		FUND CODE	SUBACTIVITY	PROGRAM ELEMENT	PROJECT	OBJECT CLASS		
STATE	OFFICE					MAJOR	MINOR	

**25 RESPONSIBLE INDIVIDUALS**

Originator (printed name)	Title	Office	Phone No (include area code)	Date
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**26 CONCEPT APPROVALS**

a. Field Public Affairs Officer (printed name)	Signature	Office	Phone No (include area code)	Date
b. Deputy State Director or Field Manager (printed name)	Signature	Office	Phone No. (include area code)	Date
c. State Office Printing Specialist (printed name)	Signature	Office	Phone No. (include area code)	Date
d. External/Public Affairs Officer (printed name)	Signature	Office	Phone No. (include area code)	Date
e. WO-610 (If required) (printed name)	Signature	Date	Pub./Exhibit Approval <input type="checkbox"/> Yes : <input type="checkbox"/> Yes, with changes--See <input type="checkbox"/> No Remarks on next page.	

**27 FINAL APPROVALS**

a. Field Public Affairs Officer (printed name)	Signature	Office	Phone No (include area code)	Date
b. Deputy State Director or Field Manager (printed name)	Signature	Office	Phone No. (include area code)	Date
c. State Office Printing Specialist (printed name)	Signature	Office	Phone No. (include area code)	Date
d. External/Public Affairs Officer (printed name)	Signature	Office	Phone No. (include area code)	Date
e. WO-610 (If required) (printed name)	Signature	Date	Pub./Exhibit Approval <input type="checkbox"/> Yes <input type="checkbox"/> Yes, with changes--See <input type="checkbox"/> No Remarks on next page.	

Remarks:

## BLM PRINTING AND PUBLICATION PROCESSING CHECKLIST

TITLE OF PUBLICATION:	REQUIRED			
	YES	NO	ATTACHED OR COMPLETED	DATE
B-1550-8 With Approval/Signature Date				
GPO 3868 "Notification of Intent to Publish"				
Appropriation Number (Current FY Fund Coding)				
Approved B-1510-18 "Purchase Requisition/ Oral Order"				
NTIS Requirements Completed (See WO I.M.No. 94-155)				
Publication Indexing System (See Manual 1555)				
B-1550-1, Document/Publication Index Listing				
Publication Distribution Instructions (See BLM Manual Section 1551.44G and Manual 1554)				
Mailing List (If <i>required</i> ) (Also see BLM Manual Section 1550.16; 1542.32 and 1542.35).				
Bureauwide Publications - To be stocked at the Service Center (PMDS) (See Manual 1556)				
Final Printing Costs (Include all cost associated with actual printing and distribution, e.g., A/A's, Press Sheet Inspections, etc.). - Use <i>Remarks Section to show costs</i> .				
Disposition of Original Materials /Films, etc. (Office location)				

Remarks (*Attach additional sheets if necessary.*)